



Child Care as Child Protection and Intervention

CHILD DEVELOPMENT POLICY ADVISORY COMMITTEE

OVERVIEW

One purpose of California's child care and development system is to protect children from abusive and negligent home situations. While delivering a melange of services, child care protects the state's youngest residents and links families to other support services within the community.

The U.S. Advisory Board on Child Abuse and Neglect recently reported that 2,000 children die from abuse or neglect each year... 5 children every day.

California policy makers recognized the importance of child care in abuse prevention and intervention when, in 1976, a pilot project gave abused or neglected children priority for placement into child care. Currently, any child referred by county Child Welfare Services (CWS), or by a qualified professional in a legal, medical, or social service agency, is given first, priority for placement into a child care setting, regardless of family income. This policy applies to all state-funded child care and development programs.

PREVENTION AND INTERVENTION

Benefits to Children

In California, 41% of all abused and neglected children are under the age of five. Children under five also suffer the highest incidence of death from abuse and neglect. These young children often live in isolation from their community. They do not attend school where teachers and administrators are mandated to report suspected abuse and neglect.

Child care providers are legally mandated to report any signs of abuse or neglect to authorities. The Legislative Analyst's Office estimates that 54% of child abuse and neglect reports originated from a legally-mandated source. School officials represent the largest source of all reports.

Child care programs for children younger than school-age serve a population at highest risk of abuse and neglect. Child care is a first step towards prevention and intervention as a child is physically separated from their abusing environment. In addition, a child care provider can recognize the signs of abuse, neglect and family dysfunction and then link the child and their family to the appropriate services, before problems might reach a crisis stage.

Benefits for Parents and Families

For parents, child care programs provide a much needed respite from childrearing responsibilities and give parents the opportunity to manage their often stressful life circumstances by accessing counseling or other social services. Trained caregivers within a child care and development program help parents understand their child's behavior and teach appropriate and positive techniques

for interacting with their children. Meanwhile, the child care setting allows the child to thrive within a supportive and developmentally enriching environment.

EXISTING CHILD CARE PROGRAMS

Once a report of child abuse or neglect has been substantiated, a social worker or other qualified professional who is mediating the situation may recommend that the child be placed into child care rather than into foster care. Children can be served regardless of family income by state subsidized child care programs.

State Department of Education

Any child referred by a county's CWS program or other qualified legal, medical and social services professional is eligible for child care and development services that are funded through the California Department of Education (CDE). State-funded programs serve children and families based upon eligibility and need criterion. State law gives an enrollment priority to referred abused and neglected children. Program allocations listed below to serve abused, neglected and at risk children underestimates the actual amount spent, due to the Department's reporting procedures.

Special Contracts to Serve Abused and Neglected Children

<u>CDE Program</u>	<u>Funding</u>
General Fund-R&R (1995-96)	\$ 1,200,000
General Fund-CWD (1994-95)	\$ 2,000,000
Federal Child Care Block Grant-APP	\$ 4,276,780
CCDBG-Training, Child Abuse	\$ 40,000

CDE administers contracts to serve abused, neglected and at risk children with sixty-one Alternative Payment Program (APP) contracts, to provide "respite" child care to children within the CWS system and other children who fit the criteria for emergency needs. Families choose an eligible provider best meeting their needs, which may include, center-based care, family child care, or a license-exempt provider. A few resource and referral service providers also maintain contracts for respite care.

In 1996, CDE distributed an additional \$2 million of General Fund carry-over (FY 94-95 funding) to approximately nineteen eligible county welfare departments. The funding was used exclusively to provide respite services to abused and neglected children and children at risk of abuse.

- 1 1993-94 GF Carry-Over distributed to resource and referral service providers.
- 2 1994-95 GF Carry-Over distributed to county welfare departments.
- 3 CCDBG Block Grant 'Quality Improvement funding spent for training providers. Previously allocated in 1994-95.

LEGISLATIVE AND COMMUNITY ACTION PROJECT

The Federal Child Care and Development Block Grant (CCDBG) was recently consolidated with the Title IV-A child care programs under passage of federal welfare reform, which was signed into law and made effective October 1, 1996. Currently, priorities for spending this federal funding are locally established, and some abused, neglected and at risk children receive child care with these funds. Alternative Payment Programs received over \$4 million in these federal moneys for serving abused, neglected and at risk children.

In the past, CCDBG funds were 'allocated for **Special Needs Training**. The training helped providers to identify and report instances of child abuse and neglect and to work with the children and families enrolled in child care and development programs.

LONG-TERM COSTS

Any form of abuse or neglect towards children threatens their social, emotional, and physical well-being, with the effects evidenced into adulthood. Victims of abuse and neglect are more likely to commit crimes, engage in substance abuse, develop psychological problems, and inflict abuse and neglect onto their own children or other family members, thereby perpetuating the cycle.

The cost to provide on-going child care and development services to children under five years is minimal when compared to the long-term costs associated with case management services, welfare dependency, therapeutic care, substance abuse treatment, and incarceration. A prevention model both safeguards the child's health and development while reducing society's costs for long-term services.

ISSUES

Although the child welfare system offers families a broad array of services, the Legislative Analyst's Office discovered that **less than 5 percent of those families utilize respite or other forms of child care**. Poor linkage to services and lack of available care may contribute to this underutilization. Other issues include:

Numbers Served: The actual number of abused, neglected and at risk children served through CDE programs is unknown due to the Department's reporting procedures. For instance, children referred by CWS may be served under the category of "special needs," and thus the numbers are obscured by other categories of need and eligibility. Also unknown are the number of children who continue to receive care through another category of priority once their eligibility 'expires under the abuse, neglect and at risk category.

CDE Reimbursements: CDE reimburses contracted providers who serve abused, neglected and at risk children at a slightly higher level than other children. While the reimbursement adequately covers general, child care expenses, it may fail to cover related costs, such as staff time and effort involved in assisting the parent, maintaining contact with the case worker or law enforcement agency, and linking families to ancillary services within the community.

Respite Care: CDE recently distributed funding for respite care services to nineteen county welfare departments, thus supplementing existing respite care funding awarded to Alternative Payment and resource and referral service providers. These "new dollars" have allowed additional children to be placed into respite care during crisis situations. However, county welfare departments were awarded one-time only funds 'from the annual General Fund "carry-over" of unspent child care funds from previous years, rather than permanent, on-going funding. Additional respite services are needed given the increasing number of referrals for child care from CWS and other qualified referring professionals, and given that in some counties children and families are placed onto a waiting list for respite care, sometimes for several months.

Continuity of Care: A child's participation in a child care program may be jeopardized once the CWS case is closed, if the child is reunited with the family, or placed into foster care or into another living arrangement. Unless need and eligibility criteria are met by the family, services are discontinued, regardless of the positive benefits to the child and the family.

The percent of children who are repeatedly served within the emergency response and family maintenance components of the child welfare system has risen between April 1985 and January 1993, from 29% to 46% of all children served.

NEXT STEPS: INTEGRATION

The Child Development Programs Advisory Committee is exploring strategies to deliver child care and development services to all abused, neglected and at risk children and their families. The Committee's dialogue with the California Department of Education and the California Department of Social Services has served to identify the issues and initiative collaboration among the departments.

Child care programs for those younger than school-age bring children into an environment that promotes healthy emotional and physical development. Child care programs lift the curtain that often hides abuse and neglect by bringing the child and the family into a nurturing and supportive community. California's commitment to serving its most vulnerable children and families can be improved by strengthening collaboration between those in the public and private sectors, and by recognizing child care as a vital component in any prevention and intervention effort.

Sources

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